PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CRNC. 103792

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Coldina 1)		(Coldiniii 2)		l			OR 7			
			· ·					RATE	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		* 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		\mathcal{O}		,	X43=		OR	X86=		
MU	JLTIPLE DEPEI	NDENT CLAIM P	RESENT			` □]		+145=		OR	+290=	-	
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II								OTHER THAN					
		(Column 1)	·	(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus ***			=		X43=		OR	X86=		
L	FIRST PRESE	ENTATION OF MI	JUIPLE DEI	PENDENT	CLAIM		ا ا	+145=		OR	+290=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	· · ·	
		(Column 1)		,	ADDII. FEE I		•	ADDII. FEE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		Ξ		X43=		OR	X86=		
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		İ			
										OR	+290=		
										OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	·	OR	X\$18=		
	Independent	*	Minus	***	· 	=		X43=		OR	X86=	-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
**	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	20, enter "20."	A	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
		nber Previously Paid					r four	nd in the app	ropriate box	in coli	umn 1.		